2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N36951

FILED Oct 14, 2009 Secretary of State

Entity Name: SOUTH SIDE CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

669 W. LANCASTER RD. ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

669 W. LANCASTER RD. ORLANDO, FL 32809

FEI Number: 59-3142153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURKE, JOHN BURKE, JOHN

1005 BÚCHANON AVENUE 901 E. BUCHANON AVE. SUITE 4 ORLANDO, FL 32809 ORLANDO, FL 32809 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN BURKE 10/14/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

CONTRELLI, JOSEPH Name: Name: Address: 669 WEST LANCASTER ROAD Address: ORLANDO, FL 32809 City-St-Zip: City-St-Zip:

Title: D/P () Delete Title: () Change () Addition

Name: BACCON, GEORGE Name: Address: 669 WEST LANCASTER ROAD Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip:

Title: DM() Delete Title: DΛ (X) Change () Addition

BURKE, JOHN Name: BURKE, JOHN Name:

1005 BUCHANON AVENUE 901 E. BUCHANON AVE. Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH CONTRELLI **PRES** 10/14/2009